SPECIAL MESSAGE ORDER FORM 2008 POLARIS



Cadet Wing Media

United States Air Force Academy P.O. Box 6066 USAFA, Colorado, 80841-6066 **Office** (719) 333-4644 **Fax** (719) 333-6376



Dear Family members, Friends and Cadet Supporters

Each year members of the Cadet Wing give up valuable time to help produce one of the nation's finest yearbooks, *POLARIS*. We are inviting you to become a part of the TRADITION OF EXCELLENCE, by placing a "Family, Friends and Supporters" message in your graduate's yearbook. One message (up to 150 total characters) to your cadet is only \$35.

Our deadline for receiving Family, Friends and Supporters Message orders is May 1, 2008.

2008 GRADUATES WILL RECEIVE THEIR OWN POLARIS YEARBOOK (AS THEY WERE PRE-PAID) BY MAIL. Below is the form to place a special message. *Mail or fax this form with your payment to Cadet Wing Media.*

Please Type or Print Legibly

| Cadet's Name: | | | | | | 04 | uadr | JII. | | | | | | |
|--|---|---|---|------------------|-----------------|--------------------------------|------------------------------|---------------|--------------|------|------|-----|------|---|
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| lo continuation lines are acceptoxes will not be printed. Messa owards 150 total. <i>Note: Your c</i> Your hard work has paid off and You're in our prayers. Always, L | ige must be printed on adet's name will automa Sample d we're all very proud o | this form in a tically be in the second f you. The A | the boxes o <i>cluded an</i> <u>es</u> .ir Force w | provide d DOE | ed, pur S NO | nctua F <i>cou</i> ecaus | tion a nt too | and s ward | spa 's th | ces | are | cou | nted | |
| | Friends & Supporter N | /lessage \$3 | 5 for 150 d | haract | er me | ssage | | | | | | | | |
| Family, I | Friends & Supporter N | | 5 for 150 c | haract | er me: | | | | | | | | | |
| Family, f 'our Last Name: | | | | haract | er me: | | e. | | | | - | | | 2 |
| | Your Firs | st Name: City/State/2 | Zip | | | Pho | one: | r FA | X: | (719 |) 33 | 3-6 | 376 | - |
| Family, Family | Your Firs | st Name: City/State/2 | Zip | , USAF | FA, CC | Pho | e. one: 41 o | # | | | | | 376 | • |
| Family, Four Last Name: ddress: Please return this form virtuals and the checks payable to: Cadet | Your Firs ia mail: Cadet Wing M | St Name: City/State/2 Media, P.O. | Zip Box 6066 | , USAF | FA, CC | Pho 9 808 | e. one: 41 o | # _ al Se | curit | | | | 376 | • |
| Family, F Your Last Name: | Your Firs ia mail: Cadet Wing M | St Name: City/State/2 Media, P.O. | Zip Box 6066 (Checks n | , USAF | FA, CC | Pho 9 808 | e. 41 o . urity | # _ al Se | curit | | | | 376 | • |